STATE OF NEW HAMPSHIRE Department of Environmental Services Air Resources Division

Form GSP-1



General Facility Information All Registrations General State Permit Registration Information

	So	urce Category	of requeste	ed General State Pe	rmit	:				
		Internal Com	nbustion Eng	gines Used as Emerg	ency	Generators				
		Nonmetallic Mineral Processing Plants								
[,]	acil	ity Informatio	on - Comple	ete the following:						
	A.	Facility Name	e:							
	B.	Mailing Addr	ess:							
		Town/City:		State: Zip Code:						
	C.	Physical Adda	ress:							
		Town/City: D. Contact Person:		Zip Code:						
	D.									
	E. Telephone Number:		ımber:	F. Fax Number:						
	G.	E-mail Addre	ss:							
	H.	Facility Owne	er:							
	I.	Mailing Addr	ess:							
		Town/City:		State: Zip Code:						
	J.	USGS Coordinates:		UTM	or		Latitude/Longitude			
			Easting:			N Latitude:	Deg	Min	Sec	
			Northing:			W Longitude:	Deg	Min	Sec	
	K.	Major Activity	y or Product	Descriptions - List o	- ıll ac	ctivities performe	ed at this fa	cility and pro	vide SIC code(s).	
				Description of Activity or Process			SIC Code			
I.		be completed	by a respon	Check all boxes and sonsible official only. Chech forms meet the appropriate the appropriate the appropriate that the appropriate the appropriate that the					ve, and the source	
		-		es covered under the G				•		
Prir	ıt/Typ									
Sign	ned:	Date:								
				s submission on behalf					this submission is ation submitted in	
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